



Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000



or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)  |   |   |   | Note: A certificate of  | f mailing can only be used for   | or domestic mailings of t                    |
|---|---|---|---|---|--|--|
| 21220 85  | 21839 7590 02/04/2005   |   |   | Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompanyi papers. Each additional paper, such as an assignment or formal drawing, mhave its own certificate of mailing or transmission. |  |  |
|   |   |   | ٠.  |   |  |  |
| POST OFFICE BO  | SWECKER & MA  | THIS LETP   |   | I hereby certify that   | ertificate of Mailing or Trans<br>this Fee(s) Transmittal is bein  | s <b>mission</b><br>g deposited with the Uni |
|   |   | , 0   | \c)\  | States Postal Service   | with sufficient postage for fir  | st class mail in an envelo                   |
| ALEXANDRIA, VA 22313-1404   |   |   | 14  | transmitted to the US   | this Fee(s) Transmittal is bein<br>with sufficient postage for fir<br>all Stop ISSUE FEE address<br>PTO (703) 746-4000, on the c   | late indicated below.                        |
| 5/2005 MBEYENES 00000   | 159 1067807 <del>9</del>  | MAY 0 4   | ربع 2005  |   |  | (Depositor's nar                             |
| C:1501  | 1400.00 OP  | P.  |   |   |  | (Signatu                                     |
| 0:1504<br>0:8001  | 300.00 DP<br>30.00 DP   | 8 70.05   | MARKS   |   |  | (D   |
| APPLICATION NO.   | FILING DATE   | TRADE   | RST NAMED INV   | ENTOR   | ATTORNEY DOCKET NO.  | CONFIRMATION NO.                             |
| 10/678,079 10/06/2003   |   | Bo Goransson  |   | on  | 024944-193   | 4085   |
| APPLN. TYPE   | SMALL ENTITY  | ISSUE FEE   |   | PUBLICATION FEE   | TOTAL FEE(S) DUE   | DATE DUE                                     |
| nonprovisional  | NO  | \$1400  |   | \$300   | \$1700   | 05/04/2005                                   |
| EXAMINER  |   | ART UNIT  |   | CLASS-SUBCLASS  | ]  |  |
| SHAKERI, HADI   |   | 3723  |   | 451-005000  | _  |  |
| 1. Change of correspondence   | address or indication of "Fe  | ee Address" (37   | 2. For printing   | on the patent front page,   | list   |  |
| CFR 1.363).   |   | , i   |   | of up to 3 registered pate  | 1 DIDMG  | , DOANE, SWE                                 |
| ☐ Change of corresponded  | ence address (or Change of 2) attached.   | Correspondence  | or agents OR, a   | • •   | & MAT  | HIS, L.L.P.                                  |
| "Fee Address" indicate PTO/SB/47; Rev 03-02 o Number is required.   | ion (or "Fee Address" Indica<br>r more recent) attached. Use  | ation form  | registered attor  | a single firm (having as<br>ney or agent) and the na<br>ent attorneys or agents. I<br>will be printed.  | mes of up to   |  |
| 3. ASSIGNEE NAME AND  | RESIDENCE DATA TO B   | E PRINTED ON THI  | E PATENT (pri   | nt or type)   |  |  |
| PLEASE NOTE: Unless recordation as set forth in   | an assignee is identified be<br>37 CFR 3.11. Completion   | clow, no assignee dat<br>of this form is NOT a  | ta will appear of substitute for fi   | n the patent. If an assig<br>ling an assignment.  | nee is identified below, the d   | ocument has been filed                       |
| (A) NAME OF ASSIGNE   | BE .  | (B) R   | RESIDENCE: (0   | CITY and STATE OR CO  | OUNTRY)  |  |
| AKTIEBOLAGET  | SKF   | GO'   | reborg,   | SWEDEN  |  |  |
| Please check the appropriate  | assignee category or catego   | ries (will not be printe  | ed on the patent  | ): 🗖 Individual 🚨 (   | Corporation or other private gre   | oup entity 🚨 Governm                         |
| 4a. The following fee(s) are  | enclosed:   | _   | ayment of Fee(  | ,   |  |  |
| X Issue Fee   |   |   | A check in the amount of the fee(s) is enclosed.  |   |  |  |
|   |   |   | Payment by credit card. Form PTO-2038 is attached.                                      |   |  |  |
| Publication Fee (No sr  |   | ed) 🚨   | Payment by co   | edit card. Form PTO-203   | 8 is attached.   |  |
|   |   | <del>\frac{\firec{\frac{\fin}}}}}}{\frac}{\frac{\fir}}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\f{\frac{\frac}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\f{</del>   | Payment by co<br>The Director<br>eposit Account   | edit card. Form PTO-202<br>is hereby authorized by<br>Number  | 8 is attached.  charge the required fee(s), or (enclose an extra c   | credit any overpayment opy of this form).    |
| Publication Fee (No sr  | Copies10  | <u>X</u>  | Payment by control The Director eposit Account  | edit card. Form PTO-201<br>is hereby authorized by<br>Number <u>02-4800</u>   | 8 is attached.  charge the required fee(s), or  (enclose an extra c  | credit any overpayment opy of this form).    |
| Publication Fee (No sr Advance Order - # of Change in Entity Status   | Copies10  |   | The Director eposit Account   | is hereby authorized by<br>Number <u>02–4800</u>  | 18 is attached.  charge the required fee(s), or  enclose an extra c  ALL ENTITY status. See 37 C   |  |
| Publication Fee (No sr Advance Order - # of  Change in Entity Status a. Applicant claims SN   | Copies10  (from status indicated above MALL ENTITY status. See s requested to apply the Issublication Fee (if required) v | c) 37 CFR 1.27.  ae Fee and Publication will not be accepted fr   | The Director eposit Account  b. Applicant is not see (if any) or om anyone other        | is hereby authorized by<br>Number 02-4800<br>s no longer claiming SM  | charge the required fee(s), or (enclose an extra c   | FR 1.27(g)(2).                               |
| Publication Fee (No sr Advance Order - # of  Change in Entity Status ( a. Applicant claims SN  The Director of the USPTO in  NOTE: The Issue Fee and Pu                             | Copies10  (from status indicated above MALL ENTITY status. See s requested to apply the Issublication Fee (if required) v | c) 37 CFR 1.27.  ae Fee and Publication will not be accepted fr   | The Director eposit Account  b. Applicant is in Fee (if any) or own anyone other ffice. | is hereby authorized by Number <u>02-4800</u> and longer claiming SM to re-apply any previouer than the applicant; a re   | charge the required fee(s), or (enclose an extra c   | FR 1.27(g)(2).                               |
| Publication Fee (No sr Advance Order - # of  Change in Entity Status  a. Applicant claims SN  The Director of the USPTO in  NOTE: The Issue Fee and Puinterest as shown by the reco | Copies10  (from status indicated above MALL ENTITY status. See s requested to apply the Issublication Fee (if required) v | in Diagram of Diagram | The Director eposit Account  b. Applicant is in Fee (if any) or own anyone other ffice. | is hereby authorized by Number <u>02-4800</u> and longer claiming SM to re-apply any previouer than the applicant; a re   | charge the required fee(s), or (enclose an extra charge the required fee(s), or (enclose an extra charge the feet of the application of the feet o | FR 1.27(g)(2).                               |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.